Office of the State Fire Marshal – Fire Prevention Division

References (s): 06-IFC/1006; 907.20.5, 06-101/7.9.3

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Although documentation must be kept, this exact form does not need to be used. Facilities are welcome to use this form as a guideline to develop their own format, or to use the form as shown for recordkeeping.

Requirements: Monthly – 30 Sec Note: You must conduct a 30 second funcational test every month

Annual – 90 Min regardless of if you conduct the 90 minutes annual test

Type: S - Exit Sign

L – Emergency lights

Unit location and type	Jan:	Feb:	Mar:	Apr:	May:	Jun:	Jul:	Aug:	Sep:	Oct:	Nov:	Dec:	Annual:	Comments

- 1.) Provide a date tested for each month
- 2.) Initial each unit tested
- 3.) Comments should include information regarding failure & replacement